

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	JAS		1-4-00
O.I.P.E. CLASSIFIER		49	1/12/00
FORMALITY REVIEW	KO	69936	2-4-00
RESPONSE FORMALITY REVIEW			

## INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 - (Through numeral)... Canceled A ..... Appeal  
 ÷ ..... Restricted O ..... Objected

Claim	Date
1	1/2/00
2	1/2/00
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10	✓ ✓ ✓
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25	✓
26	✓ ✓
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Claim	Date
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If more than 150 claims or 10 actions  
stapl additional sheet here

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